2018
In-House Counsel Program &
Annual Meeting
June 24-27, 2018
Hyatt Regency Chicago Hotel
Chicago, IL
For the most up-to-date information and to register
www.healthlawyers.org/Annual2018

In association with Illinois Association of Healthcare Attorneys (IAHA)
Chicago is famous for its many activities and attractions. It is the home of the Cubs and the White Sox, the Bears, the Bulls, and the Blackhawks; home of world-class museums along Lake Michigan; home of Magnificent Mile shopping; home to more than 7000 restaurants from pizza to Michelin-star dining. I am proud to say that Chicago is my home and as President-Elect and Chair of AHLA’s 2018 Annual Meeting, I am especially pleased that starting June 24, Chicago will be home to the 2018 Annual Meeting!

This year’s program will be rich with content and dynamic speakers, offering the most current information and analysis on a wide range of legal issues facing the health care community. Since the last Annual Meeting in San Francisco, we have seen significant mergers, passage of tax reform legislation, changes impacting the Affordable Care Act and a new Secretary of Health and Human Services, who is a health lawyer. The Annual Meeting provides an unparalleled opportunity to stay current with the country’s leading health law professionals and to network with colleagues from across the country.

We will kick off the program with two fascinating keynote speakers, both of whom are working on innovations in health care. Stephanie Devaney, PhD, Deputy Director, All of Us Research Program at NIH, will discuss precision medicine initiatives and the impact on how research is conducted. Suchi Saria, PhD, a professor at Johns Hopkins University, will share her work on the use of artificial intelligence (AI) to advance diagnosis and treatment. While these technologies will shape the future of patient care, they also present new risk and legal issues for our consideration.

The ever-popular Year in Review will provide attendees with the highlights of all areas of health law from the last year. Breakout sessions on more than 50 different topics will allow attendees to take a deeper dive into areas that interest them most. Sessions will focus on transactional issues, Medicare and Medicaid reimbursement, tax, privacy and security, antitrust, fraud and compliance, labor and employment, information technology, legal ethics and diversity. In addition to sessions that address legal, compliance, and operational issues, we have scheduled a session on Tuesday afternoon that will explore the health policy issues related to the role that economics can play in medical decision making.

AHLA’s programs are distinguished by the range of perspectives our speakers offer and the collegiality that allows us to learn from each other. The Annual Meeting will feature more than 100 leading in-house and outside counsel, representatives from government agencies, consultants, and academicians who will provide insight and analysis on regulatory changes and business developments affecting our health care clients. Whether you represent physicians, payers, hospitals and health systems, long term care providers, academic medical centers, life science companies, or government entities, there are dozens of sessions that will interest and educate you.

We often hear that our members especially enjoy the personal connections that develop at our in-person programs, so the Annual Meeting will feature plenty of networking opportunities and social events to help you get to know your colleagues, form new relationships, and enjoy Chicago with your families. Be sure to arrive in time to attend the Welcome and Diversity+Inclusion Reception on Sunday evening. On Monday evening, we will take attendees to experience one of the best museums in the city — the Museum of Science and Industry. Attendees will be able to experiment with lightning and tornados in “Science Storms”, descend into a “working” coal mine, learn about numbers in nature through a mirror maze, and experience the thrill of flight simulators. On Tuesday evening, we will bring the world-famous improvisation of The Second City to you. The ballroom at the Hyatt Regency will be transformed into a comedy club and attendees will have the opportunity to enjoy a performance customized for AHLA by The Second City’s comedians.

I hope you will plan to join us at the Annual Meeting in Chicago — there is no better place to learn, exchange ideas, and network.

Marilyn Lamar
AHLA President-Elect
Chair, Annual Meeting
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In-House Counsel Program Welcome

Chicago, known for its vibrant arts scene, numerous cultural attractions, and rich architectural history, is the host city for the 2018 AHLA In-House Counsel Program. Against this backdrop, attendees of the In-House Counsel Program will have an opportunity to both learn from and network with colleagues who face similar issues in advising health care clients. As health care organizations work towards the Triple Aim, innovation continues to be an important driver of change, particularly with respect to improved diagnostic and therapeutic options. In-house counsel, who advise clients engaged in a myriad of innovation initiatives, face various legal and regulatory compliance challenges as well as the need to manage technology-driven risk. This year’s keynote address, Managing the Innovation Challenge, will explore both the promise and perils of innovation through an interactive discussion between the former general counsel of a large academic health system, Brent L. Henry, and a distinguished physician leader, Alan E. London, MD, who will offer guidance on how in-house counsel and their clients can best reap the benefits of technology as a driver of health care innovation. Innovation in other areas of the health care industry has informed several of this year’s breakout sessions which are designed to keep attendees abreast of current legal developments and provide practical advice on thorny issues that appear in your inbox.

Please calendar June 24, 2018 and join us for the AHLA In-House Counsel Program in the Windy City!

Elisabeth Belmont
Chair, In-House Counsel Program
Saturday, June 23, 2018
2:00-6:00 pm
Registration and Information

Sunday, June 24, 2018
7:00 am-5:15 pm
Registration and Information
7:00-8:00 am
Continental Breakfast, sponsored by HealthCare Appraisers, Inc.
This event is included in the program registration; attendees and faculty are welcome.

GENERAL SESSION

8:00-8:15 am
Welcome and Introductions
Elisabeth Belmont, In-House Counsel Program Chair

8:15-9:15 am
Managing the Innovation Challenge of New Technologies
Brent L. Henry
Alan E. London, MD
The technology revolution in health care has raised expectations across the board, heralding the promise of quicker and more accurate diagnoses, targeted therapies, useful tools for healthier lifestyles and more efficient delivery of care generally. Yet the advent of these technological advances has created challenges for the in-house attorneys who must advise on their approval, selection and implementation while managing the inevitable tensions with clients who are eager to adopt such innovations yet may not fully appreciate the associated technology-driven risk. This session will explore both the promises and perils of new technologies via an interactive discussion between a physician leader and the former general counsel of a large academic health system who will offer guidance on how in-house attorneys, their clients, and the patients served can best reap the benefits of new technologies as a driver of health care innovation.

CONCURRENT SESSIONS

9:30-10:45 am Extended Sessions

A. Getting to Yes: Creating a Playbook for Innovation in Your Health System (not repeated)
Jodi G. Daniel
Laura E. Rosas
Health care providers and health plans are thinking about new ways of using technology to improve patients’ health and deliver better outcomes–from data analytics to clinical decision support to engaging with patients and members directly. This session will discuss the importance of attorneys developing their own playbook to tackle common regulatory or legal roadblocks to implementing new digital health tools and offer guidance in the following areas:

- Privacy and security requirements designed for the pre-digital health era to new technologies, including data analytics, consumer-generated data, cloud storage, and artificial intelligence
- Regulatory requirements for data access, exchange, and interoperability
- Issues in deploying telemedicine and remote monitoring solutions
- Legal and regulatory issues related to financial and data use arrangements with digital health companies and other health care stakeholders to engage with consumers in innovative ways
- Changes in policy and regulation and how to operate in an uncertain legal environment
- A framework for incorporating digital health tools in clinical practice and complying with applicable regulations and legal requirements

B. Hot Topics in Practice Management
Kirk Dobbins (Moderator)
Mike Apolskis
Almeta E. Cooper
Marilyn E. Hanzal
Change is constant in health care. Rapid changes in the health care marketplace, innovations in care delivery and products, plan and/or provider consolidation, and seemingly exponential rise in new laws and amendments to existing laws present challenges to retain knowledgeable talent, manage the efficient and effective delivery of legal advice, and continue to “keep the trains running” on the everyday responsibilities of practice management for In-House Legal Departments. This session will offer practical insight and potential solutions for practice management in these rapidly changing times. This session will provide:
Thank You to Our Sponsor

HealthCare Appraisers

HealthCare Appraisers, Inc. has provided sponsorship in support of this program and In-House Counsel Practice Group luncheon.

Program Registration Fees

$410 AHLA/IAHA Member / $610 Non-Member

Registration must be received prior to June 14, 2018 in order to appear on the attendee list. Registration is available by going online to www.healthlawyers.org/annual2018 or by calling (202) 833-1100.

Cancellations/Substitutions

Cancellations must be received in writing by June 13, 2018 and sent to Dorothy Johnson: djohnson@healthlawyers.org. Registration fee, minus the $50 administrative fee, will be refunded approximately 3-4 weeks following the program in the same form of tender as the original payment. Refunds will not be issued for cancellations received after the cancellation date, this includes no-shows. If you register for In-House Counsel Program and the Annual Meeting and are only able to attend one, you will not be charged a cancellation fee.

Substitutions will be accepted, in writing to AHLA (djohnson@healthlawyers.org), up to 2 business days prior to the event date on a one time basis. Note, that the registration fee is based on AHLA membership status of the individual who actually attends the program. Non-member substitutes will be charged the fee difference, if they are substituting for a member-discounted registration. An administrative fee of $50 will be charged for a substitution request.

Transfer to an upcoming event within one year of equal or higher value is available on a one time basis only, and requests should be submitted in writing to AHLA (djohnson@healthlawyers.org) no later than 2 business days prior to the event. An administrative fee of $50 will be charged for a transfer request.

• Practical examples of how to internally triage and efficiently address an increasing volume of requests for regulatory guidance, legal counsel, and related strategic and business advice
• Best practices for communicating value to management and senior executives
• Practical solutions and useful insights on dealing with perennial problems of managing contracts, client forum shopping among in-house attorneys, and growing the expertise and knowledge of the department team
• Innovative strategies that have been successfully implemented in in-house legal departments
• Insights on how to manage the unexpected challenges or risks in the 21st century health care market
• Ways to stay on top of pending legislation that create potential legal challenges and roadblocks

C. Innovative Collaboration–Working Together without a Merger

Aaron Cohen
Bevin M.B. Newman
Kristin O’Connell Upton

• Driven in large part by the transition towards value-based reimbursement models, the health care industry is engaging in an ever expanding array of novel modes of collaboration in the delivery and reimbursement of health care services
• Innovative arrangements for strategic coordination across provider systems (throughout the continuum of care), pharmaceuticals and medical device companies and payer organizations from service line joint ventures, payer-provider collaborations, integration of data and analytics, and coordination of population health management processes are transforming the industry, but can raise substantial antitrust and business risk
• Managing antitrust risk is as critical to success as aligning the business plan and economic incentives of partners in a strategic collaboration
• Practical insight into managing these aspects of a collaboration from conception through implementation, as well as how to weave these principles into the resulting business and integration plans

D. Navigating the Regulatory Landscape in an Integrated World

Nicole A. Liffrig Molife
Joseph L. Sipos
Julia Weisner

• Key compliance and regulatory considerations for integrated care delivery models
• Recent fraud and abuse and privacy compliance developments
• Risk-sharing and managed care innovations
• Privacy and security overlay
• Business and operational implications
• Best practices and practical take-aways on how to manage regulatory risks
11:00 am-12:00 pm

E. Mitigating Risks in Caring for the Engaged Patient  
(not repeated)
Timothy B. Adelman  
Karie Rego  
Cynthia F. Wisner  

Engaged patients are creating emerging legal issues for in-house counsel and compliance professionals. This session will address the following:

- Complying with new transparency obligations (pricing and adverse outcomes) and patient access to medical records
- Anticipating legal risks related to informed decision making and latest discussions on resolving care disputes through arbitration
- Preparing for new legal actions arising from false advertising, outcomes reporting, and consumer protection law
- Responding to the use of social media, the press, and injunctive relief to highlight care concerns
- Practical take-aways to include checklists for early action to minimize lawsuits, sample educational materials for medical staff, and sample informed consent process enhancements

F. Social Media and Health Care: Legal and Compliance Issues  
Margaret J. Davino  
Lynn A. Stansel  

- Clinical versus non-clinical use of social media
- Privacy and security issues, including role of HIPAA
  - Using and disclosing PHI in social media
  - Use of photos: Can you “de-identify” a patient photo?
- Professional standards
  - “Friending” patients
  - Doctor/patient relationship
  - Patient/doctor boundaries
- Employment issues, HR policies, and the NLRB’s policy on social media use
- Legal compliance, including defamation, copyright issues, and discrimination issues
- Advertisements, endorsements, and personal opinions
- Liability issues involved with use of social media
- Clinical applications; crowdsourcing, diagnostics, etc.
- Compliance tips in using social media to advance medicine and appropriately market and advertise

G. Trends and Emerging Issues in Managed Care Litigation  
James W. Boswell  
Jonathan M. Herman  

Litigation involving payers, providers, and patients over benefits coverage has been on an upward trend the last several years. This session will discuss:

- The types of managed care cases filed and where, based on statistical analysis of filings
- Insurer coverage and payment policies in areas such as imaging, Emergency Department services, and outpatient surgery, focusing on recent policy changes by major health insurers
- Emerging issues including:
  - Benefit disputes over mental health
  - Emergent care coverage claims and disputes
  - Out-of-network reimbursement trends
  - Overpayment claims by insurers

H. Managing the “Independents”: Legal Ethics and Tips for In-House Counsel  
Kenya Mann Faulkner  
James G. Sheehan  

Health care organizations (and other business and charitable entities) must deal with professionals and special engagements who have an “independent” role. This session will address:

- How in-house interact with and oversee these independents
- Professional rules issues on interaction with independents—conflicts, privilege, work product, disclosure
- How to document and project manage an independent engagement
- Reporting by independents to C-suite and governing body—when and how
- How “independent” reports and conclusions can or will be used
Continuing Education Credit Information

CLE/MCLE: AHLA will be applying for 6.5 credits (including 1.0 ethics credit) for 60-minute states and approximately 7.8 credits (including 1.2 ethics credit) for 50-minute states.

CPE: AHLA will be applying for 7.0 CPE credits. AHLA is registered with the National Association of State Boards of Accountancy (NASBA) as a sponsor of continuing professional education on the National Registry of CPE Sponsors. State boards of Accountancy have final authority on the acceptance of individual courses for CPE credit. Complaints regarding registered sponsors may be addressed to the National Registry of CPE Sponsors, 150 Fourth Ave. North, Suite 700, Nashville, TN 37219-2417. NASBA’s website is www.nasba.org.

CCB: This education activity has been submitted to the Compliance Certification Board (CCB)® and is currently pending their review for approval for 7.8 CCB CEUs.

Participants will be given Continuing Education Request forms at the program. Forms must be completed and returned to AHLA staff to receive credit. The sessions, unless otherwise designated, are intermediate to advance in level. This program is designed to be an update on developments in the area of health law. There are no prerequisites or advance preparations required to register for this group live program. Those seeking accounting credits should be familiar with the basic concepts and terminology associated with health law in order to obtain the full educational benefit of this program.

In-House Counsel Program

NETWORKING OPPORTUNITY

SUNDAY, JUNE 24
12:00-1:15 pm

Stories to Win the Golden Ferret Award Luncheon, hosted by In-House Counsel Practice Group, sponsored by HealthCare Appraisers, Inc.

Hear real-life, too-weird-to-be-true stories told by fellow health law attorneys, or bring your own story, and compete for the 18th Annual Golden Ferret Award. As you listen to your colleagues recounting their strangest work-related escapades, you will gain a new appreciation for your own practice environment. The coveted Golden Ferret Award will be presented to the luncheon participant who tells the most entertaining and outrageous true-life anecdote from their in-house practice. The person with the best story will win The Golden Ferret Award, a complimentary registration to next year’s In-House Counsel Program in Boston, and an iPad.

This event is included in the In-House Counsel Program registration fee; attendees and faculty are welcome. Continuing Education Credits are not available for this lunch. Those not attending the In-House Counsel Program are welcome to register for this luncheon-$60 for members of the In-House Counsel Practice Group; $70 for non-members of the Practice Group.

CONCURRENT SESSIONS

1:30-2:30 pm

I. Epidemic Urgency–The Case for Greater Access to Mental Health and Addiction Treatment (not repeated)

Elizabeth Landsverk, MD
Jennifer Lohse

The challenges of access to mental health and substance use disorder treatment in the wake of a worsening opioid epidemic are prevalent but insufficiently addressed. This session will offer two different perspectives on these challenges and practical solutions to address them. A practicing physician will examine the challenges of delivering whole-person in an environment of greater scrutiny over prescription of opioids. An in-house addiction treatment attorney will highlight the unique legal obligations related to behavioral health care delivery. This session will provide:

- The challenges that keep mental health and substance abuse treatment marginalized
- Practical guidance on establishing policies and practices that address mental health and substance use disorder treatment
- The compounded privacy laws, such as 42 CFR Part 2, related to behavioral health services
- Duty to warn and mandated reporting through a behavioral health lens

J. Immigration Issues for Health Care Providers/Employing Foreign Nationals

Deborah Hesford DosSantos
Leon Rodriguez

This session will discuss important steps to ensure compliance with immigration laws, including those applicable to hiring foreign national workers. Topics include:

- Being prepared for Immigration and Customs Enforcement (ICE) notices of inspection and other worksite enforcement
- The limits on ICE officers’ ability to conduct enforcement activity at health care facilities (The ICE Sensitive Locations Policy)
- Recent developments affecting institutions that hire foreign national employees including changes to policies affecting STEM OPT workers and stricter attestation requirements for all immigration petitions
- Updates on legislative initiatives that could affect access to high-skilled foreign national workers
- Immigration issues that may patients’ access to health care

K. Physician-Hospital Alignment and Compensation Models: The Second Generation (Plus Lessons Learned from First Generation Transactions)

Aimee Greeter
David R. Melloh

- The top 10 lessons learned from the initial (first generation) alignment transaction models
- Overall appropriate strategies for such second generation transactions
- How value-based reimbursements and other future models are affecting the next generation of physician/hospital alignment
Examples of “win-win” second generation transaction ingredients

- How to approach these second generation models with legal compliance
- “Real world” examples of second generation successes; consider appropriate contractual structure and language for such models

G. Trends and Emerging Issues in Managed Care Litigation (repeat)

2:45-4:00 pm Extended Sessions

L. Blazing New Trails in Health Care and Technology Innovation Ventures (Advanced) (not repeated)
   Bernadette M. Broccolo

Various health industry stakeholders are playing a more active investment role in the commercialization of biomedical, digital health, and other important health care discoveries, particularly those that might otherwise be left in the “valley of death” existing between government-funded basic research and later stage, industry-funded commercialization, so as to accelerate advancements in clinical care and generate new sources of funding operating needs. This session will cover:

- Emerging commercialization and monetization trends, motivating factors, percieved benefits, interested investors, funding sources, and alternative structure and approaches
- The complex, multi-dimensional combination of potential legal, regulatory and governance risks (e.g., fraud and abuse, Stark, tax-exemption, governance oversight, conflicts of interest in research and clinical care, FDA pre-market approval requirements)
- Associated planning and contracting considerations
- Strategies for navigating these complexities throughout the venture’s entire planning and implementation life cycle so as to manage the potential enterprise risk and reap the potential rewards
- Graphic illustrations of structures and roles and relationships of the players and guidelines and other tools for evaluating and managing risks, structuring the arrangements, managing the legal risks, and providing enhanced governance oversight

B. Hot Topics in Practice Management (repeat)

C. Innovative Collaboration—Working Together without a Merger (repeat)

D. Navigating the Regulatory Landscape in an Integrated World (repeat)

4:15-5:15 pm

F. Social Media and Health Care: Legal and Compliance Issues (repeat)

H. Managing the “Independents”: Legal Ethics and Tips for In-House Counsel (repeat)

J. Immigration Issues for Health Care Providers/Employing Foreign Nationals (repeat)


5:00-6:30 pm

Welcome and Diversity-Inclusion Reception, hosted by AHLA’s Diversity-Inclusion Council, sponsored by Cain Brothers, a division of KeyBanc Capital Markets

This event is included in Annual Meeting registration; attendees, faculty, and registered adult, teen and youth guests welcome. More information on page 25.
## Schedule

### Saturday, June 23, 2018

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| 7:00-8:00 am   | **Continental Breakfast**, sponsored by HealthCare Appraisers, Inc.  
                  (This event is included in the program registration; attendees and faculty are welcome) |
| 8:00-9:15 am   | **GENERAL SESSION**  
                  8:00-8:15 am  
                  Welcome and Introductions  
                  Belmont  
                  8:15-9:15 am  
                  Managing the Innovation Challenge of New Technologies  
                  Henry, London |
| 9:30-10:45 am | Extended Sessions  
                  A. Getting to Yes: Creating a Playbook for Innovation in Your Health System  
                  (not repeated)  
                  Daniel Rosas  
                  B. Hot Topics in Practice Management  
                  Dobbins (Moderator)  
                  Apolskis  
                  Cooper  
                  Hanzal  
                  C. Innovative Collaboration—Working Together without a Merger  
                  Cohen  
                  Newman  
                  Dobbins (Moderator)  
                  Apolskis  
                  Cooper  
                  Hanzal  
                  D. Navigating the Regulatory Landscape in an Integrated World  
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                  Sipos  
                  Weisner |
| 11:00 am-12:00 pm | Extended Sessions  
                  E. Mitigating Risks in Caring for the Engaged Patient  
                  (not repeated)  
                  Adelman  
                  Rego  
                  Wisner  
                  F. Social Media and Health Care: Legal and Compliance Issues  
                  Davino  
                  Stansel  
                  G. Trends and Emerging Issues in Managed Care Litigation  
                  Boswell  
                  Herman  
                  H. Managing the “Independents”: Legal Ethics and Tips for In-House Counsel  
                  Faulkner  
                  Sheehan |
| 12:00-1:15 pm  | **In-House Counsel Practice Group Luncheon**, sponsored by HealthCare Appraisers, Inc.  
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| 4:15-5:15 pm  | F. Social Media and Health Care: Legal and Compliance Issues (repeat)                       |
|               | Davino, Stansel                                                                             |
|               | H. Managing the “Independents”: Legal Ethics and Tips for In-House Counsel (repeat)         |
|               | Faulkner, Sheehan                                                                          |
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**Download the In-House Counsel Program App**

This free app is available in the iTunes App store or Google Play store by searching ‘AHLA’.

1. Download AHLA, by Bravura Technologies, onto your mobile device and hit open.

2. Choose ‘Events’ to find the In-House Counsel Program app. Click on the event (you’ll be prompted to enter your email address). You will not be able to access the event features of the app if you are not registered for the event.

3. The App will include the agenda, attendee list, and access to the PowerPoint presentations.

The In-House Counsel Program portion of the AHLA App is sponsored by Crowe.
**Faculty**

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James G. Sheehan
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Associate General Counsel
Fresenius Medical Care North America
Waltham, MA

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Livonia, MI
**Antitrust**

A. Exclusionary Practices in Health Care and Pharmaceuticals (Advanced)

H. Unique Transaction Structures–Equity Investments and Partnering with Physicians

V. Providers and Payers and Pharma, Oh My!: Antitrust Hot Topics Across the Health Care Spectrum

EE. Key Antitrust Issues, Best Practices, Developments, and Trends in Health Care Provider Mergers (Advanced)

**Behavioral Health**

N. Where Does Your Organization Stand? A Strategic Perspective for the Health Care Organizational Adaptation to the Opioid Crisis

MM. Responding to a Crisis–The Exchange of Mental Health and Substance Use Disorder Information to Address the Opioid Epidemic

ZZ. “Is Bigger Better?”–Multi-State Strategies in Behavioral Health

**Business Law and Governance**

H. Unique Transaction Structures–Equity Investments and Partnering with Physicians

M. Physician and Hospital Governance: Creating an Integrated Governance Structure for the 21st Century Health System

Y. Enriching Innovation in Health Care

BB. Private Equity Playbook: Perspectives on Transaction Planning for Seller’s Counsel

**Compliance**

C. Legal Ethics–Whose Role Is It Anyway? Creating and Maintaining a Collaborative Compliance and Legal Partnership

D. When Does a Health Care Case Go Criminal?

J. Navigating the 340B Program’s Audit, Corrective Action, and Self-Disclosure Requirements

P. Provider Challenges: Managing HIPAA Compliance with Public Affairs and Electronic Communications

R. Compliance Climate 2018: Hone into Home Health and Hospice

X. Managed Care Fraud–Year in Review and HHS-OIG Perspective

AA. Going with the Flow Downs: The Relevance of Medicare Advantage and Medicaid Managed Care Program Compliance for Providers

CC. Hot Topics in Fraud and Abuse

DD. Value-Based Payments and CMS Bundled Payment Initiatives for Physicians in a Fee-for-Service World

HH. EU GDPR: Tightening Data Privacy Standards in Clinical Trials

KK. Gaining Ground: The Future of Gainsharing

MM. Responding to a Crisis–The Exchange of Mental Health and Substance Use Disorder Information to Address the Opioid Epidemic

NN. Compliance 2.0: Leveraging the DOJ and OIG Compliance Effectiveness Evaluation Guidance and Recent Enforcement Actions to Structure a Multi-Level Plan to Protect Your Organization (Advanced)

PP. Health Data is More Precious than Gold: HIPAA Enforcement and Biosecurity Concerns

SS. 60-Day Repayment Rule: Implications for Internal and External Audits

TT. Is Commercial Reasonableness in the Eye of the Beholder? Assessing and Documenting Commercial Reasonableness for Existing Employed Physicians

VV. Cutting through the Fog of Monitoring and Auditing of User Activity in Information Systems Handling Sensitive Data
Dispute Resolution

I. Health Care Arbitration and Mediation: What You Need to Know from Claimant, Respondent, and Neutral

T. Arbitration of High Stakes Payer/Provider Disputes

Diversity

UU. Legal Issues in Transgender Health Care

XX. Diversity, Inclusion, and Equity: Best Practices for Achieving and Sustaining Diversity, Inclusion, and Equity Goals

Fraud and Abuse

B. How Government and Private Payers Use Data Analytics to Identify and Address Potential Provider Fraud

D. When Does a Health Care Case Go Criminal?

X. Managed Care Fraud—Year in Review and HHS-OIG Perspective

CC. Hot Topics in Fraud and Abuse

JJ. Hospitals under the CMS Microscope: The New Primarily Engaged in Inpatient Service Standards and Scrutiny of Provider-Based Departments (Advanced)

NN. Compliance 2.0: Leveraging the DOJ and OIG Compliance Effectiveness Evaluation Guidance and Recent Enforcement Actions to Structure a Multi-Level Plan to Protect Your Organization (Advanced)

Health Care Liability and Litigation

D. When Does a Health Care Case Go Criminal?

G. Difficult Discharges: Sending Patients Out without Getting into Trouble

L. Medicare Hearings and Appeals: Litigation, New Initiatives, and Opportunities to Exit the Backlog

N. Where Does Your Organization Stand? A Strategic Perspective for the Health Care Organizational Adaptation to the Opioid Crisis

T. Arbitration of High Stakes Payer/Provider Disputes

Health Information and Technology

B. How Government and Private Payers Use Data Analytics to Identify and Address Potential Provider Fraud

E. What if My Doctor Is a Robot?

P. Provider Challenges: Managing HIPAA Compliance with Public Affairs and Electronic Communications

Q. A Disruptive Promise: Emerging Issues with Blockchain and Health Care

Y. Enriching Innovation in Health Care

HH. EU GDPR: Tightening Data Privacy Standards in Clinical Trials

LL. Recycle, Recycle, Recycle: Key Considerations for Research, Medical Education, and Other Secondary Uses of Data

PP. Health Data is More Precious than Gold: HIPAA Enforcement and Biosecurity Concerns

VV. Cutting through the Fog of Monitoring and Auditing of User Activity in Information Systems Handling Sensitive Data

Health Policy

WW. A Health Policy Debate: The Role that Economics Can Play in Medical Decision Making

Hospitals and Health Systems

G. Difficult Discharges: Sending Patients Out without Getting into Trouble

M. Physician and Hospital Governance: Creating an Integrated Governance Structure for the 21st Century Health System

Y. Enriching Innovation in Health Care

Z. What Lies ahead for Physicians and Hospitals in America? A Concerted Look toward the Future

JJ. Hospitals under the CMS Microscope: The New Primarily Engaged in Inpatient Service Standards and Scrutiny of Provider-Based Departments (Advanced)

OO. Use of Financial Data in Business Planning for Health Systems
Annual Meeting Program Sessions By Topic Area continued

**Labor and Employment**

F. Top Employment Law Issues Facing the Health Care Industry

S. Sexual Harassment by Physicians: Implications on Medical Staff Privileges, Licensure, and Physician Practices

GG. The Anatomy of a General Counsel

QQ. Not for Women Only–Strategies to Handle Sexual Harassment and Other Workplace Issues without Derailing Your Career

**Legal Ethics**

C. Legal Ethics–Whose Role Is It Anyway? Creating and Maintaining a Collaborative Compliance and Legal Partnership

U. Legal Ethics: So, You Want to Protect That? Challenges and Pitfalls with Privileges in the Health Care Arena

**Life Sciences**

J. Navigating the 340B Program’s Audit, Corrective Action, and Self-Disclosure Requirements

HH. EU GDPR: Tightening Data Privacy Standards in Clinical Trials

LL. Recycle, Recycle, Recycle: Key Considerations for Research, Medical Education, and Other Secondary Uses of Data

RR. Legal Issues Affecting Pharmacies–A Look at Mishaps and Enforcement Actions in the Pharmacy Industry (Advanced)

**Long Term Care**

G. Difficult Discharges: Sending Patients Out without Getting into Trouble

R. Compliance Climate 2018: Hone into Home Health and Hospice

**Medical Staff, Credentialing, and Peer Review**

Q. A Disruptive Promise: Emerging Issues with Blockchain and Health Care

S. Sexual Harassment by Physicians: Implications on Medical Staff Privileges, Licensure, and Physician Practices

FF. Conducting Peer Review, Corrective Actions, and Fair Hearings with Limited Resources

YY. Real Life Perspectives on Disasters: Prepared For, Survived, and Averted

**Payers, Plans, and Managed Care**

B. How Government and Private Payers Use Data Analytics to Identify and Address Potential Provider Fraud

K. Narrow and Tiered Provider Networks from a Legal and Data Analytics Perspective

T. Arbitration of High Stakes Payer/Provider Disputes

X. Managed Care Fraud–Year in Review and HHS-OIG Perspective

AA. Going with the Flow Downs: The Relevance of Medicare Advantage and Medicaid Managed Care Program Compliance for Providers

**Physicians and Physician Organizations**

M. Physician and Hospital Governance: Creating an Integrated Governance Structure for the 21st Century Health System

S. Sexual Harassment by Physicians: Implications on Medical Staff Privileges, Licensure, and Physician Practices

Z. What Lies ahead for Physicians and Hospitals in America? A Concerted Look toward the Future

DD. Value-Based Payments and CMS Bundled Payment Initiatives for Physicians in a Fee-for-Service World

II. Medical Group Disengagement: Five Key Steps to a Successful Divorce (and How to Still Remain Friends)

OO. Use of Financial Data in Business Planning for Health Systems

TT. Is Commercial Reasonableness in the Eye of the Beholder? Assessing and Documenting Commercial Reasonableness for Existing Employed Physicians

**Professional Responsibility/Substance Abuse**

AAA. Substance Abuse: Recognizing, Understanding, and Referring a Colleague in Need
Public Interest

N. Where Does Your Organization Stand? A Strategic Perspective for the Health Care Organizational Adaptation to the Opioid Crisis

YY. Real Life Perspectives on Disasters: Prepared For, Survived, and Averted

Regulation, Accreditation, and Payment

J. Navigating the 340B Program’s Audit, Corrective Action, and Self-Disclosure Requirements

L. Medicare Hearings and Appeals: Litigation, New Initiatives, and Opportunities to Exit the Backlog

X. Managed Care Fraud—Year in Review and HHS-OIG Perspective

DD. Value-Based Payments and CMS Bundled Payment Initiatives for Physicians in a Fee-for-Service World

JJ. Hospitals under the CMS Microscope: The New Primarily Engaged in Inpatient Service Standards and Scrutiny of Provider-based Departments (Advanced)

SS. 60-Day Repayment Rule: Implications for Internal and External Audits

Tax and Finance

O. The Good, the Bad, and the Ugly—Tax Reform and Health Care Providers

W. When Good Deals Go Bad—How to Prevent or Mitigate Excise Taxes and Loss of Exempt Status

Teaching Hospitals/Academic Medical Centers

HH. EU GDPR: Tightening Data Privacy Standards in Clinical Trials

LL. Recycle, Recycle, Recycle: Key Considerations for Research, Medical Education, and Other Secondary Uses of Data

Women’s Issues

QQ. Not for Women Only—Strategies to Handle Sexual Harassment and Other Workplace Issues without Derailing Your Career

Live Tweet the Program Using #AHLA18

Will you be in Chicago for the Annual Meeting? We encourage you to live tweet @healthlawyers so that attendees can learn from more than one session at once, and so that members unable to attend still feel plugged in.

Twitter feed sponsored by
Program Registration Fees

Early Registration (on or before May 24, 2018)
- AHLA/IAHA Member: $1220
- AHLA/IAHA Multi-Member Discount: $1145
- Non-Member: $1470

Registration (between May 25-June 17, 2018)
- AHLA/IAHA Member: $1345
- AHLA/IAHA Multi-Member Discount: $1270
- Non-Member: $1595

Late Registration (on or after June 18, 2018)
- AHLA/IAHA Member: $1445
- AHLA/IAHA Multi-Member Discount: $1370
- Non-Member: $1695

Discounts

(Please note: Discounts cannot be combined)

Celebration Sale: $1145
(This is for AHLA/IAHA members only. Those who have paid to attend another in-person program during the September 2017—May 2018 educational year)

Government/Academician/Public Interest Professional
- Member: $745 / Non-Member: $820

In-House Counsel/Solo Practitioner
- $100 off full applicable rate

One Day Attendance
- AHLA/IAHA Member: $610 / Non-Member: $735

Registration must be received prior to June 14, 2018 in order to appear on the attendee list. Registration is available by going online to www.healthlawyers.org/annual2018 or by calling (202) 833-1100.

Saturday, June 23, 2018
2:00-6:00 pm
Registration and Information

Sunday, June 24, 2018
7:00 am-5:15 pm
Registration and Information
5:00-6:30 pm
Welcome and Diversity+Inclusion Reception, hosted by AHLA’s Diversity+Inclusion Council, sponsored by Cain Brothers, a division of KeyBanc Capital Markets
This event is included in program registration; attendees, faculty, and registered adult, teen, and youth guests welcome.

Monday, June 25, 2018
6:00-7:00 am
Exercise Activities: Yoga or Morning Run with the Young Professionals Council, sponsored by CBIZ Healthcare Valuation
Attendees, faculty, and registered guests welcome. There is no additional fee but pre-registration is required. More information on page 25.

7:00 am-5:30 pm
Registration and Information

7:00-8:30 am
Continental Breakfast, sponsored by Navigant
This event is included in program registration; attendees, faculty, and registered adult, teen, and youth guests welcome.

GENERAL SESSION

8:00-8:15 am
Welcome and State of the Association
- Eric Zimmerman, AHLA President
- David S. Cade, AHLA CEO
8:15-9:15 am

Keynote Address on Innovations in Health Care – Precision Medicine
Stephanie Devaney
• Precision medicine initiatives and the impact on how research is conducted

9:15-10:15 am

Keynote Address on Innovations in Health Care – Artificial Intelligence, sponsored by FTI Consulting
Suchi Saria
• The use of artificial intelligence (AI) to advance diagnosis and treatment

10:15-10:30 am


10:30 am-12:15 pm

Year in Review
Elizabeth B. Carder-Thompson
Jack S. Schroder, Jr.
It has been another tumultuous, roller coaster year for health care law developments involving health reform, reimbursement, HIPAA, fraud and abuse, antitrust, and more, while the fate of the Affordable Care Act hangs in the balance. Fasten your seatbelts! This fast-paced session will provide an overview of recent developments and introduce multiple topics to be addressed in later focused program sessions throughout the conference.

12:30-1:45 pm

Lunch on your own or attend one of the Practice Group Luncheons:
• How Non-Traditional Players in Health Care Are Changing the Game
  Hosted by Health Information and Technology, Physician Organizations, and Life Sciences Practice Groups
  Sponsored by Protenus
• Examining a Top-Down Approach to Enterprise Risk Management
  Hosted by Hospitals and Health Systems, Business Law and Governance, and Health Care Liability and Litigation Practice Groups, and Enterprise Risk Management and Behavioral Health Task Forces
  Sponsored by Jarrard Phillips Cate & Hancock, Inc.
• Table Topic Discussions-Provider Collaborations: Antitrust and Tax Considerations
  Hosted by Antitrust and Tax and Finance Practice Groups
  Sponsored by Pinnacle Healthcare Consulting

Luncheons are not included in the program registration; there is an additional fee; limited attendance; and pre-registration is required. Continuing Education Credits are not available.

2:00-3:00 pm

A. Exclusionary Practices in Health Care and Pharmaceuticals (Advanced) (not repeated)
John D. Carroll (Moderator)
Aimee E. DeFilippo
Subramaniam Ramanarayanan
• Issues in distinguishing between robust competition and exclusionary practices that harm consumers
• Types of unilateral and concerted practices that might be considered exclusionary—e.g., exclusive contracting, tying and bundling, refusals to deal, group boycotts, and more
• Legal and economic issues raised by these practices, and economic analysis and evidence that can be used in their evaluation
• Practical advice (drawn from recent cases) on how to minimize risk

B. How Government and Private Payers Use Data Analytics to Identify and Address Potential Provider Fraud
Geoffrey W. Hymans
Douglas Rahden
Steve Shandy
• OIG and private insurance data analytics experts describe some of their capabilities to identify broad trends and specific questionable billing
• How OIG uses data analytics to identify and develop administrative fraud and abusive-billing cases
• What attorneys advising health care clients should know about how their clients can use data to identify compliance risk areas

C. Legal Ethics—Whose Role Is It Anyway? Creating and Maintaining a Collaborative Compliance and Legal Partnership
Jennifer Edlind
David E. Matyas
Michelle Johnson Tidjani
• Resolving differences of opinion between the compliance and legal departments
• Should internal investigations be conducted under the Attorney-Client Privilege and Work Product Doctrine?
• What role do the Rules of Professional Conduct play in these situations?
• When and how do issues and differences get brought to the attention of other senior management or even the Board of Directors?
• Developing best practices before an issue arises
• Hypothetical situations

D. When Does a Health Care Case Go Criminal?
David S. Schumacher
Amanda P.M. Strachan
• The most common health care criminal offenses, including the Anti-Kickback Law, the health care fraud statute, the Food, Drug, and Cosmetic Act, and false statements
Cancellations/Substitutions

Cancellations must be received in writing by June 13, 2018 and sent to Dorothy Johnson: djohnson@healthlawyers.org. Registration fee, minus the $125 administrative fee, will be refunded approximately 3-4 weeks following the program in the same form of tender as the original payment. Refunds will not be issued for cancellations received after the cancellation date, this includes no-shows. If you register for In-House Counsel Program and the Annual Meeting and are only able to attend one, you will not be charged a cancellation fee.

Substitutions will be accepted, in writing to AHLA (djohnson@healthlawyers.org), up to 2 business days prior to the event date on a one time basis. Note, that the registration fee is based on AHLA membership status of the individual who actually attends the program. Non-member substitutes will be charged the fee difference if they are substituting for a member-discounted registration. An administrative fee of $125 will be charged for a substitution request.

Transfer to an upcoming event within one year of equal or higher value is available on a one time basis only, and requests submitted in writing to AHLA (djohnson@healthlawyers.org) no later than 2 business days prior to the event. An administrative fee of $125 will be charged for a transfer request.

E. What if My Doctor Is a Robot?
Gary Marchant

Health care has been identified as the number one growth area for application of artificial intelligence (AI), and hundreds of AI applications are now being deployed in the health sector. This session will cover:

- The realities—and the hype—of how AI is transforming and disrupting many aspects of health care and medicine
- The potential liability and standard of care issues associated with the application of AI in health care
- The data privacy and security issues associated with the use of big data in AI-driven health care
- The risks of and how to identify bias in AI algorithms used in health care
- Handling the legal and regulatory challenges presented by AI and its affiliated technologies such as mobile health and wearables

F. Top Employment Law Issues Facing the Health Care Industry
Lisa Kathumbi
Liz S. Washko

- Top labor and employment issues facing health care employers, and practical strategies for dealing with today’s ever-changing employment environment
- #MeToo: Addressing allegations of sexual harassment in the workplace (including harassment of employees by patients) and shaping company culture
- After Charlottesville: Avoiding employment claims and creating inclusive environments that effectively serve diverse populations
- Avoiding liability for pay discrimination claims from health care professionals: Compliance guidance and best practices
- The future of the white collar exemption salary requirement and the most common misclassification issues facing the health care industry
- Absence, leave, and disability management: Regulatory and enforcement update

G. Difficult Discharges: Sending Patients Out without Getting into Trouble
Bradley A. Nokes
Kim C. Stanger

- Discharges and terminating the patient relationship: The legal requirements and framework for compliance for acute and long term care providers
• Patients who refuse to leave
• Patients who have nowhere to go and no one to care for them
• Patients who need care elsewhere but no one will take them
• Patients whom providers refuse to treat
• Suggestions, options, and potential resources for resolving the quandary

H. Unique Transaction Structures–Equity Investments and Partnering with Physicians
Brett R. Friedman
Rudd Kierstead
• The drive to employ physicians and why it either isn’t the most ideal, or even a viable, option in some cases
• Unique transaction structures to augment or replace employment, yet provide alignment of clinical activities and interests
• Legal, business, and fair market value pitfalls and potential red and yellow flags from these transactions
• Getting to go: Key steps necessary for finalizing an arrangement
• Core elements of successful and appropriate arrangements, as well as case studies to illustrate the key aspects
• Case studies will include:
  – JV MSO. A joint venture management services organization (MSO) structure between hospitals and physicians that manage an inpatient or outpatient component of the enterprise
  – IPA Development. An independent practice association (IPA) model that achieves clinical and financial integration among providers within a geographic area
  – “Virtual” or Quasi-Equity. A construct that achieves financial alignment among providers, but without offering true equity in a joint venture or similar arrangement

3:00-3:15 pm

3:15-4:15 pm
I. Health Care Arbitration and Mediation: What You Need to Know from Claimant, Respondent, and Neutral (not repeated)
Edwin E. Brooks
Michael D. Roth
Caroline Wallitt
• Mediate, Arbitrate, or Litigate: Deciding which works best?
• Selecting the right neutral
• Successful Mediations and arbitrations from beginning to end: Best practices for preparing effective arbitration agreements, tailored discovery plans, and winning strategies
• Foxhole perspective: Lessons learned by party counsel, arbitrator, and mediator

J. Navigating the 340B Program’s Audit, Corrective Action, and Self-Disclosure Requirements
Sandra F. Durley
William H. von Oehsen
• Preparation for and responding to a 340B audit by the Health Resources and Services Administration (HRSA)
• How to appeal an adverse audit finding by HRSA
• Performing independent self-audits under attorney-client privilege
• Elements of a compliant corrective action plan
• Assessing whether to self-disclose based on whether a violation is “material”
• Challenges and guidance in offering repayment to manufacturers
• Closing out a corrective action plan

K. Narrow and Tiered Provider Networks from a Legal and Data Analytics Perspective
Brian E. Hoyt
Joseph Miller
Jeff J. Wurzberg
• Current state of Federal and state network adequacy requirements and how these affect market trends
• Contractual issues that affect health plan narrow network development and provide contracting tips for both health plans and providers
• Litigation between providers and health plans related to narrow and tiered network development
• Competition law and policy aspects of narrow and tiered networks: Trade-offs for health care consumers and current FTC and Antitrust Division cases related to network development
• Use data analytics to provide a deeper understanding of how narrow and tiered networks are designed and to “visualize” the differences in provider networks

L. Medicare Hearings and Appeals: Litigation, New Initiatives, and Opportunities to Exit the Backlog
Nicholas Francis Alarif
Amanda Axeen
• Where the OMHA backlog currently stands and current wait times under traditional appeal process and endemic issues facing OMHA and Medicare reimbursement appeals
• Recent litigation in American Hospital Association, et al v. Thomas Price, and where the case stands (this may change depending on developments with the District Court) and analysis of what any developments might mean for appellants
• Revamping of the OMHA case processing manual and implementation of attorney adjudicator authority and what the practical ramifications of these developments will be for appellants
• New initiatives provided by OMHA to reduce the backlog, including expansion of the Statistical Sampling Initiative, the CMS Settlement Conference, and Program Beneficiary Appeal Expedites
Hotel Information

Hyatt Regency Chicago Hotel
151 E Upper Wacker Dr
Chicago, IL 60601
(312) 565-1234

Hotel accommodations are not included in the registration fee. AHLA has set up a block of rooms at a discounted rate of $280/night plus tax for single/double occupancy.

When making reservations over the phone, please indicate that you are with the AHLA program. The room block may sell out prior to hotel cut-off date of Thursday, May 24, 2018. Reservations received after the cut-off date will be accepted by hotel at a space and rate availability basis only.

https://book.passkey.com/event/49333010/owner/2135/home

Travel

ATC Travel Management (ATC) has negotiated discounts with Delta, Hertz, and Alamo to bring you special airfares and car rental rates lower than those available to the public. Discounts apply for travel for AHLA 2018 meetings, discounts available 3 days pre/post meeting start/end dates. Restrictions and service fee may apply. ATC will also search for the lowest available fare on any airline.

ATC TRAVEL MANAGEMENT
1-800-458-9383
email: reservations@atcmeetings.com

ATC is available for reservations from 8:30 am until 8:00 pm Eastern, Monday through Friday.

Annual Meeting Program Agenda continued

- Benefits and drawbacks of participating in each of the OMHA initiatives and key considerations to tailor fit the correct OMHA initiative for specific types of providers
- OMHA analysis of how these new initiatives have affected the backlog and insights from a practitioner who is representing appellants through the new statistical sampling initiative

M. Physician and Hospital Governance: Creating an Integrated Governance Structure for the 21st Century Health System

Alex T. Krouse

- The transformation from multi-specialty group and hospital to integrated delivery system from a management and governance standpoint
- How to effectively perform a governance audit to strengthen process and legal structures
- How to communicate, document, and assist organizational leaders and departments in governance and management distinctions
- How to socialize governance risks due to fragmented management and governance structures
- The specific legal issues impacting what decisions should be made by clinicians, management, and the board with specific case studies
- The overarching goal is to learn about the myriad of governance and management issues that impact an organization’s ability to create an integrated governance structure that supports true health care delivery integration

N. Where Does Your Organization Stand? A Strategic Perspective for Health Care Organizational Adaptation to the Opioid Crisis

Harry J. Nelson
Montrece M. Ransom

The opioid crisis represents the biggest public health threat for US health care in a quarter century and is likely to be the predominant challenge for decades to come. This session will address:

- The public health problem associated with the opioid crisis in a health care organization-specific context
- Relevant trends in the state law related to organizational response
- The legal and compliance elements of organizational response to the opioid crisis
- Resources for thinking strategically about organizational adaptation to meet the present, future, and evolving challenge

O. The Good, the Bad, and the Ugly–Tax Reform and Health Care Providers

John R. Holdenried
Janice A. Mays
Michael J. Regier

- Key provisions of Tax Cuts and Jobs Act affecting health care providers
- Regulatory actions to implement key provisions
- Ongoing congressional concerns
P. Provider Challenges: Managing HIPAA Compliance with Public Affairs and Electronic Communications
Stephanie A. Kuhlmann
Carolyn V. Metnick
Sean J. Wright

- Compliance tips for providers dealing with electronic communications
- Navigating public affairs in compliance with HIPAA
- Best practices for provider interactions with the media and Hollywood
- Managing fast-paced provider to provider electronic communications about patient care
- Mitigating risks associated with communications by patients and family members (video, photos)
- Lessons learned for managing story-telling about patient care by patients, providers, and media

4:30-5:30 pm

Q. A Disruptive Promise: Emerging Issues with Blockchain and Health Care (not repeated)
Eric Kintner
Frank Ricotta
David Y. Stevens

Blockchain, the distributed ledger technology at the heart of digital cryptocurrencies like Bitcoin, has the potential to transform and re-imagine fundamental aspects of health care delivery. There are currently a number of key areas for blockchain’s application for health care, including digital health identity, credentialing, health data interoperability, supply chain validation, revenue cycle management, and clinical trials. To realize the full potential of blockchain to transform health care, however, there are several key legal, regulatory, and governance issues that will need to be resolved, including privacy and security (such as HIPAA, GINA, and the NAIC Insurance Data Security Model Law), interoperability standards, medical record regulations, patient consent, employer sponsored plans and ERISA, and the use and enforceability of smart contracts.

- What is blockchain and who “controls” it
- “Real world” blockchain applications and uses for health care
- Key legal, regulatory, and governance issues to enable adoption of blockchain technology
- Roadmap/checklist for evaluating and incorporating blockchain applications into health care services

S. Sexual Harassment by Physicians: Implications on Medical Staff Privileges, Licensure, and Physician Practices
Robin Locke Nagele
Kevin E. Raphael

In the #MeToo era, it is more important than ever for hospitals, health systems, and practice groups to develop strong and balanced policies and procedures for addressing complaints of sexual harassment/misconduct. This session will explore the following issues:

- Incidence of reported and unreported sexual harassment by physicians and its impact on staff morale and quality of care
- The intersection of employment, medical staff, professional board, and criminal law mandates
- Managing the legal risks—Title VII, Title IX, Section 1981, defamation, contract, tortious interference, civil rights, and antitrust claims
- Effective policies, procedures, and training to ensure complaints of sexual harassment/misconduct are appropriately raised and addressed
- Public relations, crisis management, and reporting obligations

T. Arbitration of High Stakes Payer/Provider Disputes
Marcia L. Augsburger
James E. Purcell
Kathryn Hays Sasser

- A reality check on advantages and disadvantages of arbitration vs. court litigation
- Critical arbitrator selection issues, bias, and lessons learned
- Considerations specific to payer/provider disputes
- Insider views from payer and provider perspectives, both lawyer and client
- The arbitration clause in contracts: It’s NOT boilerplate!
- What to know about AHLA arbitration and its Dispute Resolution Service

U. Legal Ethics: So, You Want to Protect That? Challenges and Pitfalls with Privileges in the Health Care Arena
Todd Presnell
Monica N. Wharton

- The corporate attorney–client privilege
- Subsidiaries and affiliates
- Special privilege considerations for public health care providers
- Internal investigations
- Patient Safety and Quality Improvement Act and state peer-review privileges
- Upjohn warnings
- Cooperating with government-enforcement agencies
Annual Meeting Program Agenda continued

Continuing Education Credit Information

**CLE/MCLE:** AHLA will be applying for 17.25 credits including 4.25 of Professional Responsibility (2.0 ethics credits/1.25 diversity/1.0 substance abuse) for 60-minute states and approximately 20.7 including 5.10 of Professional Responsibility (2.4 ethics credits/1.5 diversity/1.2 substance abuse) for 50-minute states.

**CPE:** AHLA will be applying for 20.0 CPE credits. AHLA is registered with the National Association of State Boards of Accountancy (NASBA) as a sponsor of continuing professional education on the National Registry of CPE Sponsors. State boards of Accountancy have final authority on the acceptance of individual courses for CPE credit. Complaints regarding registered sponsors may be addressed to the National Registry of CPE Sponsors, 150 Fourth Ave. North, Suite 700, Nashville, TN 37219-2417. NASBA’s website is www.nasba.org.

**CCB:** This education activity has been submitted to the Compliance Certification Board (CCB)® and is currently pending their review for approval for 20.7 CCB CEUs.

Participants will be given Continuing Education Request forms at the program. Forms must be completed and returned to AHLA staff to receive credit. The sessions, unless otherwise designated, are intermediate to advanced in level. This program is designed to be an update on developments in the area of health law. There are no prerequisites or advanced preparations required to register for this group live program. Those seeking accounting credits should be familiar with the basic concepts and terminology associated with health law in order to obtain the full educational benefit of this program.

V. Providers and Payers and Pharma, Oh My! Antitrust Hot Topics across the Health Care Spectrum
   Saralisa Brau
   Peter J. Mucchetti
   Christine L. White

- Antitrust enforcement priorities, litigation trends, and cutting-edge issues confronting stakeholders in the provider, payer, and pharma sectors. The program is intended for audiences with some antitrust familiarity, as it will focus on discrete “hot topics” and not a substantive review of the antitrust laws
- Horizontal consolidation and collaborations
- MFNs and network tiering and steering
- Pricing and strategies that blunt or delay competition
- Vertical integration

W. When Good Deals Go Bad–How to Prevent or Mitigate Excise Taxes and Loss of Exempt Status
   Gerald M. Griffith
   Kimberly Nohilly

- How to identify problematic transactions—good deals gone bad and bad deals inherited from legacy organizations
- Elements of an effective corrective action and education plan, including repayment and practical suggestions and tools for process improvement
- Difficult conversations—talking to management, physicians and other disqualified persons about excess benefit
- The disclosure decision—from Form 990 reporting obligations, to filing Form 4720, to seeking a walk-in closing agreement
- Strategies to limit the employer’s exposure for the 21% excise tax on $1 million compensation packages

X. Managed Care Fraud–Year in Review and HHS-OIG Perspective
   Gary L. Cantrell
   Kirstin Ives

- Oversight challenges in managed care fraud from the HHS-OIG perspective
- Managed care fraud trend update from HHS-OIG
- Update on risk adjustment cases against managed care organizations
- Provider/DME/home health fraud trends for payers and plans to be on the lookout for in 2018
- Payer obligations to monitor and report suspected fraud, waste, and abuse through SIUs
- Benefits of partnership between payers, plans, and law enforcement—government and payer perspectives

6:30-9:30 pm

Reception at Museum of Science and Industry, sponsored by AHLA’s Members’ Law Firms

This event is included in the program registration; attendees, faculty, and registered adult, teen, and youth guests welcome. More information on page 27.
Tuesday, June 26, 2018
7:00 am-5:45 pm
Registration and Information
7:00-8:45 am
Continental Breakfast
This event is included in the program registration; attendees, faculty, and registered adult, teen, and youth guests welcome.
7:00-8:00 am
Networking Breakfast, hosted by AHLA’s Women’s Leadership Council, sponsored by Major Lindsey & Africa
This event is included in program registration; faculty and attendees welcome; pre-registration required.

CONCURRENT SESSIONS

8:15-9:30 am Extended Sessions

Y. Enriching Innovation in Health Care
Gerard M. Nussbaum
Jeffrey W. Short
- Types of arrangements (e.g., equity partnerships/JVs, data sharing, technology collaboration, research arrangements)
- Legal issues (e.g., IP rights, contractual relationships, HIPAA, IRB, patient consent, not-for-profit/unrelated business income/charitable purpose, collective bargaining agreements)
- Benefits realization—developing approaches for defining project objectives and measuring achievement and contractual milestone management
- Assessing fit: Provider readiness to engage in innovation projects; potential partner capabilities
- Sharing the benefits: Valuing the contributions of the participants, equity, licensing, royalties
- Moving to a ‘marketable’ product/solution—avoiding being the only customer

Z. What Lies ahead for Physicians and Hospitals in America? A Concerted Look toward the Future
Thomas D. Anthony
Priya Bathija
Justin Chamblee
- A brief look back at the past 10-20 years to learn from history and plan for the future
- Examples of what’s working today and what’s NOT working today
- Future forms of collaboration, alignment, and integrations among providers
- Cutting-edge trends affecting physicians and hospitals—from structures of affiliation to reimbursement alternatives
- Economic opportunities and challenges for health care providers in the future

AA. Going with the Flow Downs: The Relevance of Medicare Advantage and Medicaid Managed Care Program Compliance for Providers
Anthony H. Choe
Kaz C. Kikkawa
Ryan T. Lipinski
- Why and how Medicare and Medicaid plans are upping their compliance oversight of providers
- Key compliance issues that invite the greatest risks and practical tips on addressing them
- Special obligations that arise as providers become more closely integrated with plans
- Operational challenges of monitoring and implementing multiple compliance requirements
- What to do when compliance issues arise

BB. Private Equity Playbook: Perspectives on Transaction Planning for Seller’s Counsel
Tynan P. Kugler
Robert D. Stone
David Weiss
- Current trends, growth drivers, and motivating factors related to health care PE ventures
- Key regulatory and compliance concerns specific to PE transactions
- Best practice insights to ensure successful due diligence
- Case study examples to describe practical considerations and challenges facing sellers contemplating PE transactions

CC. Hot Topics in Fraud and Abuse
Julie E. Kass (Moderator)
Precious Murchison Gittens
Lisa Re
- FCA updates: New case law regarding materiality, updated DOJ policies, and other significant cases
- Anti-Kickback developments
- Government enforcement priorities

DD. Value-Based Payments and CMS Bundled Payment Initiatives for Physicians in a Fee-for-Service World
Robert Furno
Jen Johnson
Kenya S. Woodruff
- The CMS perspective on and approach to MACRA, MIPS, and value-based programs
- Outside counsel and valuation perspective related to value-based trends and payment observations
- Important regulatory guidance related to value based payments and recent case law on FMV
- Structuring a value-based arrangement
Annual Meeting

NETWORKING OPPORTUNITIES

SUNDAY, JUNE 24
5:00-6:30 pm

Welcome and Diversity+Inclusion Reception, hosted by AHLA’s Diversity+Inclusion Council, sponsored by Cain Brothers, a division of KeyBanc Capital Markets

Join us and your colleagues from around the country as we welcome everyone to Chicago to kick off the 2018 Annual Meeting. Learn more about AHLA’s diversity and inclusion initiatives and network with AHLA leaders and your fellow colleagues. This event is included in the program registration; attendees, faculty, and registered adult, teen, and youth guests welcome.

MONDAY, JUNE 25
6:00-7:00 am

Exercise Activities: Yoga or Morning Run with the Young Professionals Council, sponsored by CBIZ Healthcare Valuation

Start the day off with an invigorating workout to get you through the full day of learning. We will be offering a Yoga class or a Morning Run. This event is included in program registration; attendees and registered guests welcome; pre-registration required.

Annual Meeting Program Agenda continued

• How health systems are handling the addition of value-based payments to current compensation models for employed and contracted physicians

• What to understand when determining compensation for value-based payments (employment incentives, service line initiatives, and population health)

EE. Key Antitrust Issues, Best Practices, Developments, and Trends in Health Care Provider Mergers (Advanced)
Victor Domen
Alexis J. Gilman
Mark D. Seidman

• Antitrust issues that may arise and should be considered in evaluating and negotiating a provider merger

• Best practices and practical advice for navigating antitrust issues during pre-signing, post-signing/pre-closing, and during an antitrust-agency investigation

• Recent federal and state enforcement actions and key issues, including challenges to physician-group mergers and transactions pursued under state Certificate of Public Advantage or Cooperative Agreement laws

• Antitrust enforcement trends and the direction of antitrust enforcement in health care provider mergers under the new administration and by state attorneys general

FF. Conducting Peer Review, Corrective Actions, and Fair Hearings with Limited Resources
Brian C. Betner
Nora Byrne
Susan Dubois

• Appropriate use of Medical Staff Office Professionals to streamline and facilitate effective peer review, corrective actions, and when necessary fair hearing processes

• Optimizing the roles of in-house and outside counsel

• Establishing procedures and templates that facilitate more “automation” in the peer review, corrective action, and fair hearing process

• Identifying inefficiencies in your peer review and corrective action processes

• Avoiding common mistakes involving the interaction among medical staff professionals, in-house, and outside counsel

9:45-10:45 am

GG. The Anatomy of a General Counsel (not repeated)
Almeta E. Cooper
Heather Fine
Lisa Diehl Vandecaveye

• The status of the legal market—from industry, to compensation, to hiring trends to upcoming changes

• Corporate culture and the role of the GC

• What is the evolving role of the GC?

• How do you prepare a career path to become a GC?

• How to create the most efficient partnership with recruiters
HH. EU GDPR: Tightening Data Privacy Standards in Clinical Trials
Mark Barnes
Irene M. Koch

- How adequate consent for data uses for research can be obtained under the GDPR
- The legal bases of transfer of personal data from EU to “data blacklisted” countries, such as the U.S.
- Requirements for information security under the GDPR
- Breach notification requirements
- Privacy notice requirements

II. Medical Group Disengagement: Five Key Steps to a Successful Divorce (and How to Still Remain Friends)
Alexandria Fisher
Aimee Greeter

- The operational and legal realities associated with support staff, physician and asset transitioning, both pre- and post-disengagement
- The potential issues associated with the practice and hospital’s ongoing, post-divorce relationship
- The required state regulatory licensing requirements for physicians, and in particular, midlevel providers, as an essential piece of regulatory compliance in transitioning from hospital alignment to an independent practice
- The OIG exclusion list, and what this means for support staff, physicians, and other health care providers—and more importantly, how to structure internal mechanisms to ensure compliance
- Structuring the ownership model of the new health care entity to ensure federal anti-Stark compliance, as well as state law corporate practice of medicine doctrines compliance

JJ. Hospitals under the CMS Microscope: The New Primarily Engaged in Inpatient Service Standards and Scrutiny of Provider-Based Departments (Advanced)
Patricia A. Rogers
Teresa A. Williams

- The “primarily engaged” in inpatient services criteria and the risks of non-compliance
- Section 603 site-neutral provider-based regulations for new off-campus hospital departments
- The exceptions under Section 603 for dedicated emergency services
- Time-share arrangements in provider-based space
- Ongoing compliance of CMS primarily engaged and provider-based criteria

KK. Gaining Ground: The Future of Gainsharing
Gregory D. Anderson
Robert G. Homchick

As CMS and the Administration change posture, providers are understandably confused over the emerging value-based world order. While the future is hard to predict, Gainsharing in one form or another is likely to be a key element in the evolution of the health care payment system. This session will review the status of Gainsharing, including the regulatory landscape and fair market value challenges and open issues.

- “Gainsharing” and “Shared Savings” concepts
- Regulatory considerations
- Federal laws affecting Gainsharing
- Fraud and abuse waivers
- Non-waived arrangements
- State law issues
- Tax exempt issues
- Organizational structures: Contractual and financial arrangements
- Fair Market Value and Commercial Reasonableness
- Financial and market impact analysis
- Crystal-ball predictions

LL. Recycle, Recycle, Recycle: Key Considerations for Research, Medical Education, and Other Secondary Uses of Data
Jiayan Chen
Leah A. Voigt

With the proliferation of electronic medical records and increasing digitization of health care, enthusiasm over the possibilities of leveraging data for secondary use has reached an all-time high. A historical lack of harmonization in requirements under FDA regulations, the federal research regulations known as the Common Rule, and HIPAA, however, injected regulatory risk and uncertainty into efforts to repurpose health care data. As regulators work to align their regimes and provide more clarity and pathways to tap into the promise of big data, it is critical for academic medical centers and teaching hospitals—which stand at the intersection of government-funded research and industry-sponsored research, and are also paving the way in partnerships with non-traditional health care players—to understand the evolving legal framework and business and compliance imperatives behind the quest for digital health information. This session will provide:

- Evolving areas of convergence and ambiguity across the Common Rule (including the January 2017 final rule), HIPAA, and FDA regulations regarding secondary use of data
- Strategic approaches regarding the Common Rule and HIPAA as relating to secondary use
- Recent steps by FDA to facilitate and provide more clarity on leveraging real world data and engaging in secondary use
- Challenges in generating and compiling useful clinical data that meets research needs and regulatory standards
- Planning and contracting strategies that anticipate downstream, secondary purposes or needs, and regulatory requirements
- Trends and motivators in digital health that are fueling the need for quality, reliable data

E. What if My Doctor Is a Robot? (repeat)

O. The Good, the Bad, and the Ugly–Tax Reform and Health Care Providers (repeat)
11:00 am-12:15 pm Extended Sessions

**MM. Responding to a Crisis—The Exchange of Mental Health and Substance Use Disorder Information to Address the Opioid Epidemic** (not repeated)

_Brian Altman_
_Gerald “Jud” E. DeLoss_
_Allison H. Petersen_

- Federal and state laws, including HIPAA, 42 CFR Part 2, and state mental health laws, aim to protect the privacy rights of individuals with mental and substance use disorders (SUD), but they must be balanced with the rights to high quality care which depends on sharing information
- Newly-issued guidance explains how providers may share mental health information to respond to the opioid epidemic
- Revisions to 42 CFR Part 2, the federal regulation governing SUD information, have been issued and these new and different requirements will be clarified. Proposed legislation will be discussed that would further attempt to modify Part 2
- Government, in house, and outside legal counsel will provide their insights into the legal, regulatory, enforcement, and operational issues that need to be addressed for the exchange of behavioral health data in this era of crisis

**NN. Compliance 2.0: Leveraging the DOJ and OIG Compliance Effectiveness Evaluation Guidance and Recent Enforcement Actions to Structure a Multi-Level Plan to Protect Your Organization** (Advanced)

_Andi Bosshart_
_Felicia E. Heimer_
_Tizgel K.S. High_

- Base line expectations of a compliance program and why it is not enough
- How the enforcers are stepping up their tactics and expect your organization to respond
- Yates Memo and individual liability
- DOJ and OIG Compliance Evaluation Guidance
- Recent enforcement actions that will motivate you
- Can you resolve and repay in 60 days?
- Practical tips for ramping up while not overwhelming your organization
- Legal and compliance working together to leverage resources and keep organizations on track and compliant

**OO. Use of Financial Data in Business Planning for Health Systems**

_Robert A. Gerberry_
_Catherine A. Martin_
_David A. Williams_

Hard trends regarding technology and the use of referral data and its impact on health care delivery focusing on:

- Technology—data repositories available and system support, types of data available, importance of downstream referral information on operations, and the organizations’ mission in the community related to access, quality, and outcomes
• The do’s and don’ts of utilizing data–downstream referral data used as a business decision tool rather than a compensation tool, legal considerations, practical guidance, and best practices

• The importance of systems–understanding the importance of clear communication and avoiding the landmines of not properly utilizing data

Case study

PP. Health Data is More Precious than Gold: HIPAA Enforcement and Biosecurity Concerns
Patricia Markus (Moderator)
Serena Mosley-Day
Edward H. You

• Recent HIPAA enforcement
• Breach notification highlights
• Lessons learned and available resources
• Where health care data increasingly is being stored, and how it might be used
• Long term security threats from international genetic sequencing
• Is there a biological “space race” that deserves increased focus?

Z. What Lies ahead for Physicians and Hospitals in America? A Concerted Look toward the Future (repeat)

DD. Value-Based Payments and CMS Bundled Payment Initiatives for Physicians in a Fee-for-Service World (repeat)

EE. Key Antitrust Issues, Best Practices, Developments, and Trends in Health Care Provider Mergers (Advanced) (repeat)

FF. Conducting Peer Review, Corrective Actions, and Fair Hearings with Limited Resources (repeat)

12:30 –1:45 pm

Lunch on your own or attend one of the Practice Group Luncheons:

• High Times: Managing Legalized Marijuana in the Workplace
Hosted by Labor and Employment Practice Group
Sponsored by Seyfarth Lean Consulting

• Town Hall with The Joint Commission
Hosted by Medical Staff, Credentialing, and Peer Review and Regulation, Accreditation, and Payment Practice Groups
Sponsored by NorthGauge Healthcare Advisors LLC

• Contracting and Compliance Issues Related to Ancillary and Downstream Vendors: An Interactive Discussion
Hosted by Payers, Plans, and Managed Care Practice Group
Sponsored by BRG Healthcare LLC

Luncheons are not included in the program registration; there is an additional fee; limited attendance; and pre-registration is required. Continuing Education Credits are not available.

CONCURRENT SESSIONS

2:00-3:00 pm

QQ. Not for Women Only–Strategies to Handle Sexual Harassment and Other Workplace Issues without Derailing Your Career (not repeated)
Lois Cornell (Moderator)
Stephanie R. Gaines
Alton B. Harris
Juanita B. Rodriguez

• The economic benefits of effectively managing a diverse workforce
• Synopsis of anti-discrimination/harassment law
• Handling inappropriate client comments and actions
• Dealing with the aftermath of Weinstein et al. – countering backlash and over-reactions
• Questions and scenarios

RR. Legal Issues Affecting Pharmacies–A Look at Mishaps and Enforcement Actions in the Pharmacy Industry (Advanced) (not repeated)
Benjamin Martin Daniels
Lindsay P. Holmes

• Pharmacy practice and common areas of concern related to compliance
• Legal issues related to enforcement actions pharmacies encounter, including state enforcement (e.g., state boards of pharmacy) and federal enforcement (e.g., DEA, OIG, FDA)
• Legal issues related to adverse contractual actions (e.g., payer audits and charge backs)
• Strategies for handling enforcement actions for pharmacy clients

SS. 60-Day Repayment Rule: Implications for Internal and External Audits
David Fuchs
Andrew D. Ruskin

• The 60-Day Repayment Rule Statute and regulations
• Potential avenues for making repayment, based on attendant facts and circumstances
• Practical suggestions for conducting internal audits compliant with the 60-Day Repayment Rule
• Criteria for determining whether an audit finding by the MAC, RAC, or OIG serves as “credible information” of additional overpayments
• Differing views on open 60-Day Repayment Rule issues from the Government and the Private Sector perspectives
Annual Meeting
NETWORKING OPPORTUNITIES continued

TUESDAY, JUNE 26
7:00-8:00 am

Networking Breakfast, hosted by AHLA’s Women’s Leadership Council, sponsored by Major Lindsey & Africa
This event is not included in program registration; attendees and registered guests welcome; pre-registration required.

8:30-10:30 pm

Dessert Reception and The Second City Performance, sponsored by Veralon Partners
A reception will be held from 8:30-9:30 pm and the show will begin at 9:30 pm.

Since 1959, The Second City has established itself as a Chicago landmark and a national treasure. The theatre that launched the careers of such comic greats as John Belushi, Mike Myers, Bill Murray, Gilda Radner, and more offers nightly comedy shows, as well as a variety of other programs and services and for one night only The Second City will come direct to AHLA. The Second City will perform a private show for attendees at the Hyatt Hotel. You do not want to miss this event. All attendees, faculty, and registered adult and teen guests are welcome. Individual tickets may also be purchased for this event. Please note: Some of the comedic material used by The Second City may be targeted at an adult audience.

This event is included in the program registration; attendees, faculty, and registered adult, teen, and youth guests welcome.

Annual Meeting Program Agenda continued

TT. Is Commercial Reasonableness in the Eye of the Beholder? Assessing and Documenting Commercial Reasonableness for Existing Employed Physicians
Jennifer L. Simpson-Oliver
Debra Slater

- Current regulatory/compliance trends regarding commercial reasonableness
- Definition of, and criteria for assessing, commercial reasonableness
- On-going due diligence and internal procedures/standards to assess and document commercial reasonableness
- Emerging areas of increased scrutiny
- What happens if the compensation is not commercially reasonable?

G. Difficult Discharges: Sending Patients Out without Getting into Trouble (repeat)

K. Narrow and Tiered Provider Networks from a Legal and Data Analytics Perspective (repeat)

U. Legal Ethics: So, You Want to Protect That? Challenges and Pitfalls with Privileges in the Health Care Arena (repeat)

3:15-4:15 pm

UU. Legal Issues in Transgender Health Care
(not repeated)
Karen C. Owens
Trent Stechschulte

- Patient population that has been “invisible;” demographic data issues
- Hot button “bathroom” and “hospital room” questions
- Strategies for respectful communications in clinical settings
- HIPAA confidentiality issues, including application of the minimum necessary rule and responding to requests to amend names/pronouns/gender markers: Electronic health records challenges, changes in gender markers, problems with gender-based EHR shortcuts, promoting optimal care when gender markers are inconsistent with internal organs, using an anatomical inventory, and standardization of gender references
- Proper coding
- Insurance coverage, including recent coverage litigation

VV. Cutting through the Fog of Monitoring and Auditing of User Activity in Information Systems Handling Sensitive Data
David Holtzman
Robert Lord

- How UEBA technologies can identify anomalous and potentially risky behavior
- OCR and FTC enforcement actions that have influenced the current best practice approach to monitoring user activity
- Common use cases of monitoring and audit involving electronic health record technologies and other applications that hold PHI or other sensitive data
- The pros and cons of deploying UEBA monitoring tools
- Federal and state law considerations in monitoring workforce and patient’s information system activity
A central issue in health policy is the role that economics can play in medical decision making. A few courts appear to take the position that economic considerations should have no role in medical decision making. With relatively few exceptions, medical benefits under private and public health insurance are described in terms of medical necessity. This panel of thought leaders will examine the proper role of economic factors such as adequacy, and least costly alternatives for courses of diagnosis and treatment, in determining what care is medically necessary. In a health care system moving from fee-for-service to value-based payment structures, managed care organizations would have a statutory or contractual rationale for restricting benefits when less costly alternatives are available. Issues such as how to define adequate medical care, who makes that decision, the different roles that medical necessity might play in fee-for-service vs. managed care context, and how market forces could be expected to affect the definition and its implementation in a private market setting, will be examined by the panel. The audience will be encouraged to participate in this robust discussion.
CONCURRENT SESSIONS

8:00-9:15 am Extended Sessions

YY. Real Life Perspectives on Disasters: Prepared For, Survived and Averted (not repeated)
Andrea M. Ferrari (Moderator)
Gena C. Peyton
Miglisa L. Capo Suria
- Real life stories of legal issues and responses in disasters, including
  - Expected and unexpected issues arising in preparation for a disaster
  - Expected and unexpected issues arising in the immediate response to a disaster
  - Addressing the long term repercussions of a disaster
- The new 96-hour rule and the real experience
- Advice for the role of counsel in managing the unforeseen while keeping operational when disaster strikes
- Top ten tips for counsel in preparing for, surviving, and averting disasters

Y. Enriching Innovation in Health Care (repeat)

AA. Going with the Flow Downs: The Relevance of Medicare Advantage and Medicaid Managed Care Program Compliance for Providers (repeat)

BB. Private Equity Playbook: Perspectives on Transaction Planning for Seller’s Counsel (repeat)

CC. Hot Topics in Fraud and Abuse (repeat)

NN. Compliance 2.0: Leveraging the DOJ and OIG Compliance Effectiveness Evaluation Guidance and Recent Enforcement Actions to Structure a Multi-Level Plan to Protect Your Organization (Advanced) (repeat)

OO. Use of Financial Data in Business Planning for Health Systems (repeat)

PP. Health Data is More Precious than Gold: HIPAA Enforcement and Biosecurity Concerns (repeat)

9:30-10:30 am

ZZ. “Is Bigger Better?”–Multi-State Strategies in Behavioral Health (not repeated)
Jordan Lamos
Jennifer M. Lohse
Purvi B. Maniar
- Multi-state strategies and advantages
- Economies of scale
- Diversified payer base
• Larger footprint and patient pool
• Leveraging tele-mental health
• Considerations and tools
• Varying state tele-behavioral regulations
• Varying state licensure requirements
• Multiple federal and state privacy regimes
• Varying state corporate practice requirements

C. Legal Ethics–Whose Role Is It Anyway? Creating and Maintaining a Collaborative Compliance and Legal Partnership (repeat)

M. Physician and Hospital Governance: Creating an Integrated Governance Structure for the 21st Century Health System (repeat)

N. Where Does Your Organization Stand? A Strategic Perspective for Health Care Organizational Adaptation to the Opioid Crisis (repeat)

P. Provider Challenges: Managing HIPAA Compliance with Public Affairs and Electronic Communications (repeat)

T. Arbitration of High Stakes Payer/Provider Disputes (repeat)

JJ. Hospitals under the CMS Microscope: The New Primarily Engaged in Inpatient Service Standards and Scrutiny of Provider-Based Departments (Advanced) (repeat)

KK. Gaining Ground: The Future of Gainsharing (repeat)

10:45-11:45 am

AAA. Substance Abuse: Recognizing, Understanding, and Referring a Colleague in Need (not repeated)
   Chelsy A. Castro

Recent studies have confirmed that the overwhelming stress that is commonplace in our legal profession disproportionately results in attorneys suffering higher level of depression, anxiety, addiction, and other serious issues at rates much higher than those seen in the general population. Participants in this session will learn:

• Why attorneys are a vulnerable population
• The common mental health and substance abuse issues faced by our colleagues
• The signs and symptoms of those issues
• What to do when you identify a colleague in need

F. Top Employment Law Issues Facing the Health Care Industry (repeat)

V. Providers and Payers and Pharma, Oh My! Antitrust Hot Topics across the Health Care Spectrum (repeat)

W. When Good Deals Go Bad–How to Prevent or Mitigate Excise Taxes and Loss of Exempt Status (repeat)

LL. Recycle, Recycle, Recycle: Key Considerations for Research, Medical Education, and Other Secondary Uses of Data (repeat)

SS. 60-Day Repayment Rule: Implications for Internal and External Audits (repeat)

TT. Is Commercial Reasonableness in the Eye of the Beholder? Assessing and Documenting Commercial Reasonableness for Existing Employed Physicians (repeat)

VV. Cutting through the Fog of Monitoring and Auditing of User Activity in Information Systems Handling Sensitive Data (repeat)

12:00-1:30 pm

Lunch on your own or attend the Practice Group Luncheon:

OIG Town Hall
Hosted by Fraud and Abuse, Post-Acute and Long Term Services, Academic Medical Centers and Teaching Hospitals Practice Groups
Sponsored by Bloomberg Law

This luncheon is not included in the program registration; there is an additional fee; limited attendance; and pre-registration is required. Continuing Education Credits are not available. More information on page 31.

Adjournment
# Annual Meeting

## Schedule

### Saturday, June 23, 2018

<table>
<thead>
<tr>
<th>Time</th>
<th>Event</th>
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<tbody>
<tr>
<td>2:00-6:00 pm</td>
<td>Registration and Information</td>
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### Sunday, June 24, 2018

<table>
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<tr>
<th>Time</th>
<th>Event</th>
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<tbody>
<tr>
<td>7:00 am-5:15 pm</td>
<td>Registration and Information</td>
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| 5:00-6:30 pm  | Welcome and Diversity+Inclusion Reception, hosted by AHLA's Diversity+Inclusion Council, sponsored by Cain Brothers, a division of KeyBanc Capital Markets  
                  (This event is included in program registration; attendees, faculty, and registered adult, teen, and youth guests welcome.) |

### Monday, June 25, 2018

<table>
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<tr>
<th>Time</th>
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| 6:00-7:00 am  | Exercise Activities: Yoga or Morning Run with the Young Professionals Council, sponsored by CBIZ Healthcare Valuation  
                  (Attendees and registered guests welcome. There is no additional fee but pre-registration is required.) |
| 7:00 am-5:30 pm | Registration and Information                                          |
| 7:00-8:30 am  | Continental Breakfast, sponsored by Navigant  
                  (This event is included in program registration; attendees, faculty, and registered adult, teen, and youth guests welcome.) |
| 8:00 am-12:15 pm | GENERAL SESSION  
                   8:00-8:15 am  
                   Welcome and State of the Association  
                   Zimmerman, Cade  
                   8:15-9:15 am  
                   Keynote Address on Innovations in Health Care - Precision Medicine  
                   Devaney  
                   9:15-10:15 am  
                   Keynote Address on Innovations in Health Care - Artificial Intelligence, sponsored by FTI Consulting  
                   Saria  
                   10:15-10:30 am  
                   10:30 am-12:15 pm  
                   Year in Review  
                   Carder-Thompson, Schroder |
Monday, June 25, 2018 continued

12:30-1:45 pm

Lunch on your own or attend one of the Practice Group Luncheons:

- **How Non-Traditional Players in Health Care Are Changing the Game**, hosted by Health Information and Technology, Physician Organizations, and Life Sciences Practice Groups, sponsored by Protenus
- **Table Topic Discussions-Provider Collaborations: Antitrust and Tax Considerations**, hosted by Antitrust and Tax and Finance Practice Groups, sponsored by Pinnacle Healthcare Consulting

(Luncheons are not included in the program registration; there is an additional fee; limited attendance; and pre-registration is required. Continuing Education Credits are not available.)

<table>
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<th>2:00-3:00 pm</th>
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<tbody>
<tr>
<td><strong>A. Exclusionary Practices in Health Care and Pharmaceuticals</strong> (Advanced) (not repeated) Carroll (Moderator) DeFilippo Ramanarayanan</td>
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<tr>
<td><strong>B. How Government and Private Payers Use Data Analytics to Identify and Address Potential Provider Fraud</strong> Hymans Rahden Shandy</td>
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<tr>
<td><strong>C. Legal Ethics—Whose Role Is It Anyway? Creating and Maintaining a Collaborative Compliance and Legal Partnership</strong> Edlind Matyas Tidjani</td>
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<tr>
<td><strong>D. When Does a Health Care Case Go Criminal?</strong> Schumacher Strachan</td>
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<tr>
<td><strong>E. What if My Doctor Is a Robot?</strong> Marchant</td>
</tr>
<tr>
<td><strong>F. Top Employment Law Issues Facing the Health Care Industry</strong> Kathumbi Washko</td>
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<td><strong>G. Difficult Discharges: Sending Patients Out without Getting into Trouble</strong> Nokes Stanger</td>
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<tr>
<td><strong>H. Unique Transaction Structures—Equity Investments and Partnering with Physicians</strong> Friedman Kierstead</td>
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<th>3:00-3:15 pm</th>
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<tr>
<td><strong>Beverage and Snack Break</strong>, sponsored by Sullivan, Cotter and Associates, Inc.</td>
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<th>3:15-4:15 pm</th>
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<tbody>
<tr>
<td><strong>I. Health Care Arbitration and Mediation: What You Need to Know from Claimant, Respondent, and Neutral</strong> (not repeated) Brooks Roth Wallitt</td>
</tr>
<tr>
<td><strong>J. Navigating the 340B Program’s Audit, Corrective Action, and Self-Disclosure Requirements</strong> Durley von Oehsen</td>
</tr>
<tr>
<td><strong>K. Narrow and Tiered Provider Networks from a Legal and Data Analytics Perspective</strong> Hoyt Miller Wurzberg</td>
</tr>
<tr>
<td><strong>L. Medicare Hearings and Appeals: Litigation, New Initiatives, and Opportunities to Exit the Backlog</strong> Alarif Axeen</td>
</tr>
<tr>
<td><strong>M. Physician and Hospital Governance: Creating an Integrated Governance Structure for the 21st Century Health System</strong> Krouse</td>
</tr>
<tr>
<td><strong>N. Where Does Your Organization Stand? A Strategic Perspective for Health Care Organizational Adaptation to the Opioid Crisis</strong> Nelson Ransom</td>
</tr>
<tr>
<td><strong>O. The Good, the Bad, and the Ugly—Tax Reform and Health Care Providers</strong> Holdenried Mays Regier</td>
</tr>
<tr>
<td><strong>P. Provider Challenges: Managing HIPAA Compliance with Public Affairs and Electronic Communication</strong> Kuhlmann Metnick Wright</td>
</tr>
</tbody>
</table>
### Monday, June 25, 2018 continued

<table>
<thead>
<tr>
<th>Time</th>
<th>Session</th>
</tr>
</thead>
</table>
| 4:30-5:30 pm | Q. A Disruptive Promise: Emerging Issues with Blockchain and Health Care (not repeated)  
Kintner  
Ricotta  
Stevens |
|            | R. Compliance Climate 2018: Hone into Home Health and Hospice (not repeated)  
Bewley  
Brown  
Hessler |
|            | S. Sexual Harassment by Physicians: Implications on Medical Staff Privileges, Licensure, and Physician Practices  
Nagele  
Raphael |
|            | T. Arbitration of High Stakes Payer/Provider Disputes  
Augusburger  
Purcell  
Sasser |
|            | U. Legal Ethics: So, You Want to Protect That? Challenges and Pitfalls with Privileges in the Health Care Arena  
Presnell  
Wharton |
|            | V. Providers and Payers and Pharma, Oh My! Antitrust Hot Topics across the Health Care Spectrum  
Brau  
Mucchetti  
White |
|            | W. When Good Deals Go Bad–How to Prevent or Mitigate Excise Taxes and Loss of Exempt Status  
Griffith  
Nohilly |
|            | X. Managed Care Fraud–Year in Review and HHS-OIG Perspective  
Cantrell  
Ives |
| 6:30-9:30 pm | Reception at Museum of Science and Industry, sponsored by AHLA’s Members’ Law Firms  
(This event is included in the program registration; attendees, faculty, and registered adult, teen, and youth guests welcome.  
Transportation will be provided. More information on page 27.) |

### Tuesday, June 26, 2018

<table>
<thead>
<tr>
<th>Time</th>
<th>Session</th>
</tr>
</thead>
<tbody>
<tr>
<td>7:00 am-5:45 pm</td>
<td>Registration and Information</td>
</tr>
</tbody>
</table>
| 7:00-8:45 am | Continental Breakfast  
(This event is included in the program registration; attendees, faculty, and registered adult, teen, and youth guests welcome.) |
| 7:00-8:00 am | Networking Breakfast, hosted by AHLA’s Women’s Leadership Council, sponsored by Major Lindsey & Africa  
(This event is included in program registration; faculty and attendees welcome; pre-registration required.) |
| 8:15-9:30 am | Extended Sessions |
| Y. Enriching Innovation in Health Care  
Nussbaum  
Short |
| Z. What Lies ahead for Physicians and Hospitals in America? A Concerted Look toward the Future  
Anthony  
Bathija  
Chamblee |
| AA. Going with the Flow Downs: The Relevance of Medicare Advantage and Medicaid Managed Care Program Compliance for Providers  
Choe  
Kikkawa  
Lipinski |
| BB. Private Equity Playbook: Perspectives on Transaction Planning for Seller’s Counsel  
Kugler  
Stone  
Weiss |
| CC. Hot Topics in Fraud and Abuse  
Kass (Moderator)  
Gittens  
Re |
| DD. Value-Based Payments and CMS Bundled Payment Initiatives for Physicians in a Fee-for-Service World  
Furno  
Johnson  
Woodruff |
| EE. Key Antitrust Issues, Best Practices, Developments, and Trends in Health Care Provider Mergers (Advanced)  
Domen  
Gilman  
Seidman |
| FF. Conducting Peer Review, Corrective Actions, and Fair Hearings with Limited Resources  
Betner  
Byrne  
Dubois |
### 9:45-10:45 am

<table>
<thead>
<tr>
<th>GG. The Anatomy of a General Counsel (not repeated)</th>
<th>HH. EU GDPR: Tightening Data Privacy Standards in Clinical Trials</th>
<th>II. Medical Group Disengagement: Five Key Steps to a Successful Divorce (and How to Still Remain Friends)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cooper Fine Vandecaveye</td>
<td>Barnes Koch</td>
<td>Fisher Greeter</td>
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<td>Rogers T. Williams</td>
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</tbody>
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### 10:45-11:00 am

<table>
<thead>
<tr>
<th>KK. Gaining Ground: The Future of Gainsharing</th>
<th>LL. Recycle, Recycle, Recycle: Key Considerations for Research, Medical Education, and Other Secondary Uses of Data</th>
<th>E. What if My Doctor Is a Robot? (repeat)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Anderson Hornchick</td>
<td>Chen Voigt</td>
<td>Marchant</td>
</tr>
</tbody>
</table>

### 11:00 am-12:15 pm Extended Sessions

<table>
<thead>
<tr>
<th>MM. Responding to a Crisis–The Exchange of Mental Health and Substance Use Disorder Information to Address the Opioid Epidemic (not repeated)</th>
<th>NN. Compliance 2.0: Leveraging the DOJ and OIG Compliance Effectiveness Evaluation Guidance and Recent Enforcement Actions to Structure a Multi-Level Plan to Protect Your Organization (Advanced)</th>
<th>OO. Use of Financial Data in Business Planning for Health Systems</th>
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<tbody>
<tr>
<td>Altman DeLoss Petersen</td>
<td>Boshart Helmer High</td>
<td>Gerberry Martin D. Williams</td>
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<td>Markus (Moderator) Mosley-Day You</td>
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</tbody>
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<table>
<thead>
<tr>
<th>Z. What Lies ahead for Physicians and Hospitals in America? A Concerted Look toward the Future (repeat)</th>
<th>DD. Value-Based Payments and CMS Bundled Payment Initiatives for Physicians in a Fee-for-Service World (repeat)</th>
<th>EE. Key Antitrust Issues, Best Practices, Developments, and Trends in Health Care Provider Mergers (Advanced) (repeat)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Anthony Bathija Chamblee</td>
<td>Furno Johnson Woodruff</td>
<td>Domen Gilman Seidman</td>
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<tr>
<td></td>
<td></td>
<td>Betner Byrne Seidman</td>
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</table>

### 12:30 –1:45 pm

Lunch on your own or attend one of the Practice Group Luncheons:
- **High Times: Managing Legalized Marijuana in the Workplace**, hosted by Labor and Employment Practice Group, sponsored by Seyfarth Lean Consulting
- **Town Hall with The Joint Commission**, hosted by Medical Staff, Credentialing, and Peer Review and Regulation, Accreditation, and Payment Practice Groups, sponsored by NorthGauge Healthcare Advisors LLC
- **Contracting and Compliance Issues Related to Ancillary and Downstream Vendors: An Interactive Discussion**, hosted by Payers, Plans, and Managed Care Practice Group, sponsored by BRG Healthcare LLC

(Luncheons are not included in the program registration; there is an additional fee; limited attendance; and pre-registration is required. Continuing Education Credits are not available.)
### 2:00-3:00 pm

<table>
<thead>
<tr>
<th>Topic</th>
<th>Speakers</th>
</tr>
</thead>
<tbody>
<tr>
<td>QQ. Not for Women Only—Strategies to Handle Sexual Harassment and Other Workplace Issues without Derailing Your Career (not repeated)</td>
<td>Cornell (Moderator) Gaines Harris Rodriguez</td>
</tr>
<tr>
<td>RR. Legal Issues Affecting Pharmacies—A Look at Mishaps and Enforcement Actions in the Pharmacy Industry (Advanced) (not repeated)</td>
<td>Daniels Holmes</td>
</tr>
<tr>
<td>SS. 60-Day Repayment Rule: Implications for Internal and External Audits</td>
<td>Fuchs Ruskin</td>
</tr>
<tr>
<td>TT. Is Commercial Reasonableness in the Eye of the Beholder? Assessing and Documenting Commercial Reasonableness for Existing Employed Physicians</td>
<td>Simpson-Oliver Slater</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Topic</th>
<th>Speakers</th>
</tr>
</thead>
<tbody>
<tr>
<td>G. Difficult Discharges: Sending Patients Out without Getting into Trouble (repeat)</td>
<td>Nokes Stanger</td>
</tr>
<tr>
<td>K. Narrow and Tiered Provider Networks from a Legal and Data Analytics Perspective (repeat)</td>
<td>Hoyt Miller Wurzberg</td>
</tr>
<tr>
<td>U. Legal Ethics: So, You Want to Protect That? Challenges and Pitfalls with Privileges in the Health Care Arena (repeat)</td>
<td>Presnell Wharton</td>
</tr>
</tbody>
</table>

### 3:15-4:15 pm

<table>
<thead>
<tr>
<th>Topic</th>
<th>Speakers</th>
</tr>
</thead>
<tbody>
<tr>
<td>UU. Legal Issues in Transgender Health Care (not repeated)</td>
<td>Owens Stechschulte</td>
</tr>
<tr>
<td>VV. Cutting through the Fog of Monitoring and Auditing of User Activity in Information Systems Handling Sensitive Data</td>
<td>Holtzman Lord</td>
</tr>
<tr>
<td>D. When Does a Health Care Case Go Criminal? (repeat)</td>
<td>Schumacher Strachan</td>
</tr>
<tr>
<td>WW. A Health Policy Debate: The Role that Economics Can Play in Medical Decision Making (not repeated)</td>
<td>Blumstein (Moderator) Hall Seshamani</td>
</tr>
</tbody>
</table>

### 4:30-5:30 pm

<table>
<thead>
<tr>
<th>Topic</th>
<th>Speakers</th>
</tr>
</thead>
<tbody>
<tr>
<td>B. How Government and Private Payers Use Data Analytics to Identify and Address Potential Provider Fraud (repeat)</td>
<td>Hymans Rahden Shandy</td>
</tr>
<tr>
<td>H. Unique Transaction Structures—Equity Investments and Partnering with Physicians (repeat)</td>
<td>Friedman Kierstead</td>
</tr>
<tr>
<td>X. Managed Care Fraud—Year in Review and HHS-OIG Perspective (repeat)</td>
<td>Cantrell Ives</td>
</tr>
<tr>
<td>HH. EU GDPR: Tightening Data Privacy Standards in Clinical Trials (repeat)</td>
<td>Barnes Koch</td>
</tr>
<tr>
<td>XX. Diversity, Inclusion, and Equity: Best Practices for Achieving and Sustaining Diversity, Inclusion and Equity Goals (not repeated)</td>
<td>Dobbins (Moderator) Douglass Lee</td>
</tr>
</tbody>
</table>

### 8:30-10:30 pm

**Dessert Reception and The Second City Performance, sponsored by Veralon Partners**  
*This event is included in the program registration; attendees, faculty, and registered adult, teen, and youth guests welcome. More information on page 29.*
### Wednesday, June 27, 2018

#### 7:00 am-1:30 pm

**Registration and Information**

#### 7:00-8:30 am

**Continental Breakfast**
*(This event is included in the program registration; attendees, faculty, and registered adult, teen, and youth guests welcome.)*

#### 7:00-7:50 am

Attend one of the state networking breakfasts:
AL/LA/MS/TN, sponsored by HORNE LLP, Florida, Georgia, Illinois, Ohio
*(These events are included in the program registration; attendees and faculty welcome; there is no additional fee; pre-registration required.)*

#### 8:00-9:15 am  Extended Sessions

<table>
<thead>
<tr>
<th>YY. Real Life Perspectives on Disasters: Prepared For, Survived, and Averted (not repeated)</th>
<th>Y. Enriching Innovation in Health Care (repeat)</th>
<th>AA. Going with the Flow Downs: The Relevance of Medicare Advantage and Medicaid Managed Care Program Compliance for Providers (repeat)</th>
<th>BB. Private Equity Playbook: Perspectives on Transaction Planning for Seller's Counsel (repeat)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ferrari (Moderator) Peyton Suria</td>
<td>Nussbaum Short</td>
<td>Choe Kikkawa Lipinski</td>
<td>Kugler Stone Weiss</td>
</tr>
<tr>
<td><strong>CC. Hot Topics in Fraud and Abuse (repeat)</strong></td>
<td><strong>NN. Compliance 2.0: Leveraging the DOJ and OIG Compliance Effectiveness Evaluation Guidance and Recent Enforcement Actions to Structure a Multi-Level Plan to Protect Your Organization (Advanced) (repeat)</strong></td>
<td><strong>OO. Use of Financial Data in Business Planning for Health Systems (repeat)</strong></td>
<td><strong>PP. Health Data is More Precious than Gold: HIPAA Enforcement and Biosecurity Concerns (repeat)</strong></td>
</tr>
<tr>
<td>Kass (Moderator) Gittens Re</td>
<td>Bossart Helmer High</td>
<td>Gerberry Martin D. Williams</td>
<td>Markus Mosley-Day You</td>
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#### 9:30-10:30 am

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<tr>
<td>Lampos Lohse Maniar</td>
<td>Edlind Matyas Tidjani</td>
<td>Krouse</td>
<td>Nelson Ransom</td>
</tr>
<tr>
<td><strong>P. Provider Challenges: Managing HIPAA Compliance with Public Affairs and Electronic Communications (repeat)</strong></td>
<td><strong>T. Arbitration of High Stakes Payer/Provider Disputes (repeat)</strong></td>
<td><strong>JJ. Hospitals under the CMS Microscope: The New Primarily Engaged in Inpatient Service Standards and Scrutiny of Provider-Based Departments (Advanced) (repeat)</strong></td>
<td><strong>KK. Gaining Ground: The Future of Gainsharing (repeat)</strong></td>
</tr>
<tr>
<td>Kuhlmann Metnick Wright</td>
<td>Augsburger Purcell Sasser</td>
<td>Rogers T. Williams</td>
<td>Anderson Hornchick</td>
</tr>
</tbody>
</table>
### 10:45-11:45 am

<table>
<thead>
<tr>
<th>AAA. Substance Abuse: Recognizing, Understanding, and Referring a Colleague in Need</th>
<th>F. Top Employment Law Issues Facing the Health Care Industry</th>
<th>V. Providers and Payers and Pharma, Oh My! Antitrust Hot Topics across the Health Care Spectrum</th>
<th>W. When Good Deals Go Bad–How to Prevent or Mitigate Excise Taxes and Loss of Exempt Status</th>
</tr>
</thead>
<tbody>
<tr>
<td>Castro (not repeated)</td>
<td>Kathumbi</td>
<td>Brau Mucchetti</td>
<td>Griffith Nohilly (repeat)</td>
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<tbody>
<tr>
<td>Chen Voigt (repeat)</td>
<td>Fuchs Ruskin (repeat)</td>
<td>Simpson-Oliver Slater</td>
<td>Holtzman Lord (repeat)</td>
</tr>
</tbody>
</table>

### 12:00 noon-1:30 pm

**Lunch on your own or attend the Practice Group Luncheon:**

**OIG Town Hall**, hosted by the Fraud and Abuse, Post-Acute and Long Term Services, and Academic Medical Centers and Teaching Hospitals Practice Groups, sponsored by Bloomberg Law

(This luncheon is not included in the program registration; there is an additional fee; limited attendance; and pre-registration is required. Continuing Education Credits are not available. More information on page 31.)

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**Download the Annual Meeting App**

This free app is available in the iTunes App store or Google Play store by searching ‘AHLA’.

1. Download AHLA, by Bravura Technologies, onto your mobile device and hit open.
2. Choose ‘Events’ to find the Annual Meeting App. Click on the event (you’ll be prompted to enter your email address). You will not be able to access the event features of a app if you are not registered for the event.
3. The App will include the agenda, attendee list, and access to the PowerPoint presentations. Play along in the Scavenger Hunt for a chance to win great prizes.

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Senior Counsel  
Cigna - Healthspring  
Nashville, TN
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- Winston & Strawn LLP

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- Carhahan Group
- CBIZ Healthcare Valuation
- Change Healthcare
- CobbleStone Systems
- Coker Group
- Crowe LLP
- DoctorsManagement LLC
- ECG Management Consultants
- HealthCare Appraisers, Inc.
- HORNE LLP
- Huron Consulting
- Major Lindsay & Africa
- Meditract, Inc.
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